

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

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Commissioner for Patents  
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**INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

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28120      7590      02/24/2004

**ROPS & GRAY LLP**  
**ONE INTERNATIONAL PLACE**  
**BOSTON, MA 02110-2624**



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### Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Susan M. Cannon	(Depositor's name)
	(Signature)
May 21, 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/670,049	09/25/2000	Freda D. Miller	CIBT-P03-120	4083

TITLE OF INVENTION: MULTIPOTENT NEURAL STEM CELLS FROM PERIPHERAL TISSUES AND USES THEREOF

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$0	\$665	05/24/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
MURPHY, JOSEPH F	1646	435-377000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

### 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

#### (A) NAME OF ASSIGNEE

McGill University

#### (B) RESIDENCE: (CITY and STATE OR COUNTRY)

Montreal, Quebec  
CANADA

Please check the appropriate assignee category or categories (will not be printed on the patent):  individual  corporation or other private group entity  government

4a. The following fee(s) are enclosed:

- Issue Fee  
 Publication Fee  
 Advance Order - # of Copies Ten

#### 4b. Payment of Fee(s):

- A check in the amount of the fee(s) is enclosed.  
 Payment by credit card. Form PTO-2038 is attached.  
 The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 03-2095 (enclose an extra copy of this form) deficiencies

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. Only

(Authorized Signature) (Date)

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This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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01 FC:2501	665.00 OP
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PATENT  
ATTORNEY DOCKET NO. 08338/028002

Certificate of Mailing: Date of Deposit: May 21, 2004

I hereby certify under 37 C.F.R. § 1.8(a) that this correspondence is being deposited with the United States Postal Service as first class mail with sufficient postage on the date indicated above and is addressed to Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Susan M. Cannon

Printed name of person mailing correspondence

A handwritten signature of Susan M. Cannon.

Signature of person mailing correspondence

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Freda D. Miller et al. Art Unit: 1646

Serial No.: 09/670,049 Examiner: Joseph F. Murphy

Filed: September 25, 2000 Customer No.: 21559

Title: MULTIPOTENT NEURAL STEM CELLS FROM PERIPHERAL  
TISSUES AND USES THEREOF

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REPLY TO NOTICE OF ALLOWANCE

In reply to the Notice of Allowance that was mailed in connection with the above-captioned case on February 24, 2004 and having confirmation number 4083, enclosed are:

A completed fee transmittal form PTOL-85; and

A check for \$695.00 to cover the issue fee required by 37 C.F.R. § 1.18(a) of \$665.00, and the patent copy fee required by 37 C.F.R. § 1.19(a)(1)(i) of \$30.00 for ten patent copies.

If there are any other charges or any credits, please apply them to Deposit Account  
No. 03-2095.

Date:

May 20, 2004

Respectfully submitted,

Kristina Bicker-Brady, Ph.D., P.C.  
Reg. No. 39109

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